

# City of Shreveport Department of Community Development EMERGENCY REQUEST FOR SERVICE

# **BEAT THE HEAT II**

□ Other

The program is designed to provide air conditioners (A/C) to homeowners by installing window units to relieve them from the hot temperatures during summer months. Having no A/C is considered an emergency situation or condition that occurred recently without warning. It is also considered detrimental and poses a threat to life and/or the health and safety for occupants, which requires immediate action.

HOUSEHOLD DATA			
Name:			
Address:			
Phone Number:	E-mail Address:		
Marital Status:	Female Head of Household?   Yes   No		
How long have you lived at this address:	Do you own other real estate property? □ Yes □ No If "Yes" please list address:		
Have you previously received services from t	the City of Shreveport for home repairs? □ Yes □ No		
RACE & ETHNICITY			
Do you consider yourself to be Hispanic?	□ Yes □ No		
Please check one of the following which appl	ies to you:		
□ American Indian/Alaskan Native	□ American Indian/Alaskan Native & Black		
□ American Indian/Alaskan Native & White	□ Asian		
□ Asian & White	□ Black/African American		
□ Black/African American & White	□ Native Hawaiian/Pacific Islander		

□ White

### LIST ALL PERSONS LIVING IN HOUSEHOLD:

	First Name	Last Name	Relationship	Age	Sex	Social Security #
1						
2						
3						
4						
5						

If additional persons reside in your household, please list on separate page.

## SOURCE OF INCOME: WHAT ARE THE SOURCES OF YOUR INCOME?

Family Member	Employer or Income Source	Address of Employer	Telephone Number	Monthly Income	Additional Income & Source

## **CONSENT TO RELEASE INFORMATION**

Signing below authorizes the release of information from your records to the City of Shreveport, Department of Community Development's Neighborhood Revitalization Program. This authorization is made in connection with an application that has been made in order to obtain CDBG funds for home repair.

This release is specific to all organizations including FEMA.	

## APPLICANT CERTIFICATION

The applicant (whether one or more) certifies that all information in the application and all information furnished in support of this application, is given for the purpose of obtaining a Housing Rehabilitation grant from the City of Shreveport, Department of Community Development's Neighborhood Revitalization Program, and is true and complete to the best of the applicant's knowledge and belief. The applicant additionally certifies that the applicant is the OWNER AND OCCUPANT of the property to be repaired. The applicant consents to the verification of any of the information contained in this application.

I understand that the release of information does not guarantee that assistance will be provided, but without the information, assistance may not be available.

Initials	

# Signature of Applicant(s)

Applicant's Signature:	Date:
Applicant's Signature:	Date:

PENALTY FOR FALSE OR FRADULENT STATEMENT: U.S.C. Title 18, Section 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States, knowingly and willfully falsifies...or makes any false writing or document knowing the same to contain any false, fictitious, or fraudulent statement or entry shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

